PATENT APPLICATION FEE DETERMINATION RECOIL Effective October 1, 2003									10/002414				
CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL TYPE	ENTITY	OR	OTHER THAN SMALL ENTITY		
TC	OTAL CLAIMS	•	25				ŀ	RATE	FEE	7	RATE	FEE	
FO)R		NUMBER FILED .		NUME	BER EXTRA		BASIC FE	385.00	OR	BASIC FEE	770.00	
то	TAL CHARGEA	ABLE CLAIMS	ひ ら minus 20=		*	5		X\$ 9=	1	OR	X\$18=	90	
IND	DEPENDENT CL	LAIMS	minus 3 =		•	6		X43=		1	X86=	/~	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT						 	OR	∧00=	<u> </u>	
							+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							,	TOTAL		OR	TOTAL	860	
CLAIMS AS AMENDED - PART II /// 8/(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL E		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	. 25	Minus	" Ć	25	=		X\$ 9=		OR	X\$18=		
√ME	Independent	• 7	Minus	***		=		X43=	1	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+145=	 	1	+290=		
·								TOTA		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. FEI	-	JOR ,	ADDIT. FEE		
		(Column 1) CLAIMS		HIGHE		(Column 3)	1		ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total	*	Minus	**		=]]	X\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	***		=		X43=	1	OR	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM]	- 445	1	1			
·								+145=	_	OR	+290= TOTAL		
								ADDIT. FEE		OR ,	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOI PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	 	X\$ 9=		OR	X\$18=		
			Minus	thin .		5	╽┟	X43=	 		X86=		
_	FIRST-PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┞	A40-	 	OR			
• #	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								•	OR	+290=		
H	** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid F r" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL DOIT. FEE		
Ť	he "Highest Num	ber Previously Paid) For (Total or	ind pender	nt) is the	highest numbe	r fou	nd in the ap	propriate box	in colu	ımn 1.		

Application or Docket Number